

**Policy of the Virginia Board of Medicine on  
the Use of Confidential Consent Agreements**

Section 54.1-2400(14)

Pursuant to the provisions of Section 54.1-2400(14), the Board of Medicine may enter into a confidential consent agreement with a practitioner only in cases involving minor misconduct where there is little or no injury to a patient or the public and little likelihood of repetition by the practitioner. The board cannot enter into a confidential consent agreement if there is probable cause to believe the practitioner has (i) demonstrated gross negligence or intentional misconduct in the care of patients or (ii) conducted his practice in such a manner as to be a danger to the health and welfare of his patients or the public.

The determination as to the appropriateness of a confidential consent agreement shall be delegated to the President, or another board member designated by the President, at the probable cause stage through a review and recommendation by the Executive Director or Medical Review Coordinator. For any case identified by the President for resolution by a confidential consent agreement, “appropriateness” includes determining any violation or terms, and authorizing entry on behalf of the Board.

The types of cases that may be subject to the use of a confidential consent agreement will include, but are not limited to, the following:

- ♦ Failure to complete required hours of continuing education
- ♦ Failure to complete the physician profile
- ♦ Advertising